Run Date: 08/17/2016

AZ DEPARTMENT OF WATER RESOURCES **WELL REGISTRY REPORT - WELLS55**

Well Reg.No

Location A 3.0 4.0 32 C D C **55 -** 220900

AMA PHOENIX AMA

Registered

DAVID TEDESCO

Name

5037 E. SKY DESERT LANE

File Type NEW WELLS (INTENTS OR APPLICATIONS)

Application/Issue Date 06/21/2012

PARADISE VALLEY

AZ 85253

Owner OWNER

Driller No. 767

Driller Name ARIZONA MONSOON H2O, INC.

Driller Phone 480-471-2323

County MARICOPA

Parcel No. 168-74-003G **Intended Capacity GPM**

35.00

Well Type NON-EXEMPT

SubBasin EAST SALT RIVER VALLEY

Watershed SALT RIVER

Registered Water Uses DOMESTIC

Registered Well Uses WATER PRODUCTION

Discharge Method BUCKET - BARREL - STOPWATCH

Power ELECTRIC MOTOR 1 - 5 HP

Well Depth 700.00 Case Diam Pump Cap. 7.00 Case Depth **Draw Down** 50.00 Water Level

Acres Irrig 0.00

5.00

700.00

300.00

Tested Cap 7.00

> CRT X Log X

Finish PLASTIC OR PVC

Contamination Site:

NO - NOT IN ANY REMEDIAL ACTION SITE

Tribe: Not in a tribal zone

Comments Well Site: 5037 E Sky Desert Ln, Paradise Valley, AZ 85253

Places Of Use

A 3 0 4 0 32 C D C

Current Action

8/17/2016

860 CHANGE OF WELL OWNERSHIP

Action Comment: sym

Action History

7/5/2016

860 CHANGE OF WELL OWNERSHIP

Action Comment:

6/15/2016

860 CHANGE OF WELL OWNERSHIP

Online Action Comment:

11/20/2012

805

PUMP INSTALLATION COMPLETION REPORT RECEIVED/ENTERED

Action Comment:

8/17/2012

750 WELL DRILLER REPORT AND WELL LOG RECEIVED/ENTERED

Action Comment:

7/13/2012

755 WELL CONSTRUCTION COMPLETED

Action Comment: kr

6/21/2012

550 DRILLING AUTHORITY ISSUED

bew Action Comment:

6/21/2012

555

Action Comment:

DRILLER & OWNER PACKETS MAILED

6/19/2012

210 COUNTY HEALTH AUTHORITY ENDORSED

Action Comment: bew

6/19/2012

NOI RECEIVED FOR A NEW PRODUCTION WELL 150

Action Comment: bew

Run Date: 08/17/2016

AZ DEPARTMENT OF WATER RESOURCES **WELL REGISTRY REPORT - WELLS55**

6/19/2012

907 45-454(C) LAND NOT WITHIN 100 FT. OF DESIGNATED PROVIDER

Action Comment: bew



Arizona Department of Water Resources

Water Management Division

P.O. Box 36020 Phoenix, Arizona 85067-6020 (602) 771-8527 • www.azwater.gov

Request to Change Well Information

Review instructions prior to completing form in black or blue ink. RECEIVED

You must include with your Notice:

check or money order for any required fee(s)
 Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

AUG 0 8 2016

A(3-4)32

** PLEASE PRINT CLEAR	LY **	ADWP	00. 100
SECTION 1. REGISTRY	YINFORMATION		
Well Owner		Location of Well	
FULL NAME OF COMPANY, ORG	ANIZATION, OR INDIVIDUAL	WELL LOCATION ADDRESS (IF ANY)	
MAILING ADDRESS		TOWNSHIP (N/S) RANGE (E/W) SECTIO	N 160 ACRE 40 ACRE 10 ACRE
CITY / STATE / ZIP CODE		LATITUDE ' ' "	LONGITUDE
CONTACT PERSON NAME AND	ritle	Degrees Minutes Second METHOD OF LATITUDE/LONGITUDE USGS Quad Map Conven	
TELEPHONE NUMBER	FAX	NAD-83 Other (please specific COUNTY ASSESSOR'S PARCEL ID N	ecify): UMBER COUNTY WHERE WEL
		BOOK 168 MAP 74	PARCEL IS LOCATED.
Type of Request (CHECK			
Change of Well Drillin (Fill out Section 2)	g Contractor X Change of (Fill out Se		e of Well Information n, use, etc.) (Fill out Section 4)
	TO CHANGE WELL DRILLIN		FEE \$120 per Well
drilling firm prior to the	commencement of well drilling or	eive this request and issue authorizatio abandonment.	n to the new
Current Well Drilling Co	ontractor	New Well Drilling Contract	tor
FULL NAME OF COMPANY, ORG	ANIZATION, OR INDIVIDUAL	FULL NAME OF COMPANY, ORGANIZ	ATION, OR INDIVIDUAL
DWR LICENSE NUMBER		DWR LICENSE NUMBER	ROC LICENSE CATEGORY
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX
SECTION 3. STATEMEN	NT OF CHANGE OF WELL OV	VNERSHIP	FEE \$30 per Well
Previous Well Owner		New Well Owner	
FULL NAME OF COMPANY, ORGA SCOTT & PAULA MAILING ADDRESS	ANIZATION, OR INDIVIDUAL	FULL NAME OF COMPANY, ORGANIZ DAVID TEDESCO MAILING ADDRESS	ATION, OR INDIVIDUAL
6210 E. HUMM.	ING BIRD LANE.	5037 E. SKY DES	SERT LANE
PARADISE VALLE CONTACT PERSON NAME AND T	Y AZ 85253	CONTACT PERSON NAME AND TITLE	AZ 85253
TELEPHONE NUMBER 1480-551-0480	TRST AMERICAN TITE FAX 866 -874-1064	TELEPHONE NUMBER	FAX
SECTION 4. CHANGE C	F WELL INFORMATION (No F	ee Required)	
IOTE: Applies only to wells EXPLAIN	that have already been drilled. For	or proposed wells, an amended Notice	of Intent to Drill a Well must be file
SECTION 5. OPTIONAL	BY PROPERTY OWNER AN	D WELL OWNER ONLY	
	x, I hereby provide ADWR permiss is well. (See instructions.)	sion to enter the property for the purpos	se of taking water level
SECTION 6. WELL OW	NER SIGNATURE		
I HEREBY CERTIFY that th	e above statements are true to the	best of my knowledge and belief.	
TYPE OR PRINT NAME AND TITLE	E	SIGNATURE OF WELL OWNER	DAT



DOUGLAS A. DUCEY
Governor

THOMAS BUSCHATZKE
Director

ARIZONA DEPARTMENT of WATER RESOURCES

1110 West Washington Street, Suite 310 Phoenix, Arizona 85007 602.771.8500 azwater.gov

July 5, 2016

Shari Campos First American Title Insurance 6263 N Scottsdale Suite 110 Scottsdale, AZ 85250

Re: Online Change of Well Ownership

Dear Ms. Campos:

The Arizona Department of Water Resources' (Department) records show that an Online "Change of Well Ownership" was submitted on June 15, 2016. Unfortunately, the method of payment used to complete the transaction was not accepted. Accordingly, the well of record was changed back to the previous owners, Scott & Paula Lyon.

In order to update the record you must submit an original application with a check, money order or cashier's check. I have enclosed an application for your convenience.

Please note, unless your company's check is approved for Electronic Funds Transfer, payment cannot be made with a check with our Online Change of Well Ownership. First American Title Insurance must submit the applications directly to the Department.

Sincerely,

Stella Murillo, Manager

Groundwater Permitting and Wells Unit

30.00

Batch Header										
Agy	Date	Туре	Number							
TRA	06/20/2016	6	506							

Total for document JUD10438

Unfavorable Credit Card Adjustment Equivalent to TC505A

Document Number: JUD10438 **Document / Effective Date:** 06/20/2016

Adjustment for: Water Resources - Credit Card Activity

Compt	roller's Obj	oot:	0		
	70 ·		0	PCA:	77777
	roller's GL	Code:	0	Index :	77777
Agency	Object:		0	Appropriation Year:	2016
Agency GL Code:		(0	Fund:	2600
Suffix	Agency	Transaction Cod	de Description		Amount
1	WCA	783	Credit Card Fees		30.00

Payment Collection Gateway

- · My Account
- Logout

Jeri Mcanerny [jjmcanerny]

- · Dashboard
- Online Reporting

Online Reports

Transaction Details

General Information

Transaction ID:

166020057

Tender Type:

Online Check

Transaction Type:

Debit

Remittance ID:

-5637

Client Account Number:

N/A

Tax Amount:

\$0.00

Total Amount:

\$30.00

Transaction Date:

June 15, 2016 03:18:13 PM MST

Parent Transaction:

N/A

Status:

Success

Fail Message:

N/A

Received Via:

Integrated Web Payments

Transaction Posted by:

N/A

Check Account Information

Company:

First American Title Insurance

Checkwriter's Name:

First American Title Insurance

Address Line 1:

6263 N. Scottsdale Rd

Address Line 2:

Suite 110

City:

SCOTTSDALE

State:

AZ

ZIP Code:

85250

Country:

United States

Account Type:

Checking

Check Type:

Corporate

Partial Account Number:

- 0000

Routing Transit Number:

122241255

Custom Information

Payment Application:

Arizona Water Resources

Right Or Permit Number:

220900

Annual Report Type:

Well Information Change

Payment ID:

NULL

SG ID:

NULL

SG Email:

NULL

Credit or void this transaction Print this receipt

Velocity Payment System Version 2015-1 - Copyright © 2016 Govolution, LLC.

168-74-003G Residential Parcel

This is a residential parcel located at 5037 E SKY DESERT LN PARADISE VALLEY 85253. and the current owner is TEDESCO DAVID. It was last sold on 05/01/2016 for \$2,700,000. Its current year full cash value is \$2,036,700.

Property Information

5037 E SKY DESERT LN PARADISE VALLEY 85253

MCR#

PT LOT 6 /SE4 SW4/ FR NE COR W 744.42' S 492.39' TO POB S 3:46' E

470.10' W 335.52' N 10:44' E 427.63' E 75' N 44:52' E 70.71' E 100' TO POB Description:

SCOTTSDALE UNIFIED SCHOOL DISTRICT

2.84 AC

33.55584442 | -111.97221963 Lat/Long

Lot Size 130,580 sq ft.

R-43 Zoning

Lot#

SCOTTSDALE UNIFIED #48 **High School District**

Elementary School

District

Local Jurisdiction PARADISE VALLEY

S/T/R 32 3N 4E

Market

14/025 Area/Neighborhood

Subdivision (0 Parcels)

Owner Information

TEDESCO DAVID

Mailing Address 5037 E SKY DESERT LN, PARADISE VALLEY, AZ 85253

Deed Number 160379956 Last Deed Date 06/01/2016 Sale Date 05/01/2016 Sale Price \$2,700,000

Unofficial 20 Document

Recording Requested by: First American Title Insurance Company 14 Yo

When recorded mail to: David Tedesco 5037 East Sky Desert Lane Paradise Valley, AZ 85253

WARRANTY DEED

File No. 255-5762105 (FL)

For the consideration of TEN AND NO/100 DOLLARS, and other valuable considerations, I or we,

Scott Bennett Lyon and Paula Marie Lyon, Trustees of The Scott and Paula Lyon Family Trust U/T/A Dated December 8, 1997, the GRANTOR does hereby convey to

David Tedesco, a married man, the GRANTEE

the following described real property situate in Maricopa County, Arizona:

That part of Lot Six (6), Section Thirty-Two (32) Township Three (3) North, Range Four (4) East of the Gila and Salt River Base and Meridian, described as follows:

From the Northeast corner of Lot Six (6) run south 89 degrees 52 Minutes West along the North line of Lot Six (6), a distance of 744.42 feet to a point from which the Northwest corner of Lot Six (6) bears South 89 degrees 52 minutes West 569.04 feet;

Thence South 0 degrees 7 minutes 30 seconds West 492.39 feet to the true point of beginning of the parcel of land herein described and the Northeast corner thereof;

Thence South 3 degrees 46 minutes East along the West line of property conveyed by Deed recorded in Docket 2149, Page 54, records of Maricopa County, Arizona, a distance of 470.10 feet to a point on the North line of the South 370 feet of said Lot Six (6): thence South 89 degrees 44 minutes west along said North line of the South 370 feet of Lot Six (6) a distance of 335.52 feet;

Thence North 10 degrees 44 minutes East along the East line of the property conveyed in Docket 2200, Page 79, records of Maricopa County, Arizona, a distance of 427.63 feet;

Thence North 89 degrees 52 minutes East 75 feet; thence North 44 degrees 52 minutes East 70.71 feet; thence North 89 degrees 52 minutes East 100 feet to the true point of beginning.

Pursuant to ARS 33-404, Beneficiaries names and addresses under said trust(s) are disclosed in Beneficiary Disclosure attached hereto.

Subject To: Existing taxes, assessments, covenants, conditions, restrictions, rights of way, easements and all other matters of record.

And the GRANTOR does warrant the title against all persons whomsoever, subject to the matters set forth above.

DATED: February 17, 2016

File No.: 255-5762105 (FL) A.P.N.: 168-74-003G 3

Warranty Deed - continued

Scott Bennett Lyon and Paula Marie Lyon, Trustees of The Scott and Paula Lyon Family Trust U/T/A Dated December 8, 1997

Paula Marie Lyon, Trustee

STATE OF

County of

, before me, the undersigned Notary Public, personally appeared Scott Bennett Lyon and Paula Marie Lyon, Trustees of The Scott and Paula Lyon Family Trust U/T/A Dated December 8, 1997, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that by his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

My Commission Expires:

MARGARETA. LUDWIG Notary Public - State of Arizona

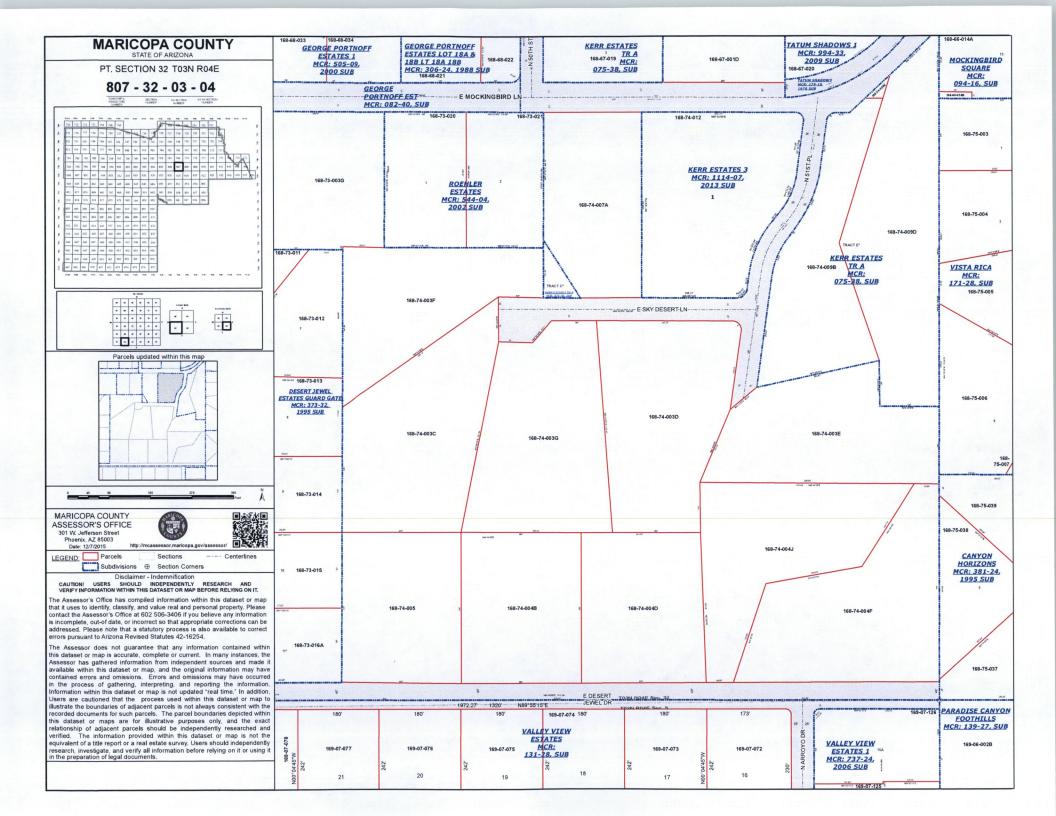
MARICOPA COUNTY My Commission Expires Jan. 16, 2018



168-74-003G







Printed: 8/9/2016 4:30:11 PM

Arizona Department of Water Resources

1110 West Washington Street, Suite 310 Phoenix AZ 85007

Customer:

FIRST AMERICAN TITLE **INSURANCE COMPANY**

6263 N. SCOTTSDALE ROAD, SUITE

110

SCOTTSDALE, AZ 85250

Receipt #:

17-46738

Office:

MAIN OFFICE

Receipt Date: 08/09/2016

Sale Type:

IN PERSON

Cashier:

WRSYM

Item No.	Function Code	AOBJ	Description	Ref ID	Qty	Unit Price	Ext Price
81213	WRFREV	4439-TT	Change of Ownership/Change of Well Information/Well Assignment	220900	1	30.00	30.00
					RECEIPT	TOTAL:	30.00

Payment type: CHECK

Amount Paid: \$30.00

Payment Received Date: 08/09/2016

Notes: FROM TTA.

Check # 41466777

First American Title Insurance Company, Scottsdale PR. 4000 Ofc. 4255 (414) (FL/sc)

CHECK NO. 41466777

DATE: 07/08/2016

FILE NO. 255-5762105

SETTLEMENT DATE: 06/01/2016

CHECK AMOUNT: \$30.00

BUYER: Tedesco

SELLER: The Scott and Paula Lyon Family Trust

Property Address: 5037 East Sky Desert Lane, Paradise Valley, AZ 85253

Funds Due

Charge Details:

Well Transfer:

30.00

Re:

No refund wit

Thank you for doing business with First American Title Insurance Company



Receipt For Request to Change Well Ownership

Authority for fee: A.R.S. § 45-113 and A.A.C. R12-15-104

Keep this for your records

WELL REGISTRATION NUMBER

55-220900

Pursuant to Arizona Revised Statutes (A.R.S.) 45-593(C), the person to whom a well is registered must notify Arizona Department of Water Resources of Water Resources (ADWR) of a change in ownership of the well and the new owner must furnish information as required by ADWR to keep its well registration records current and accurate.

FEE \$30.00 per WELL

SECTION 1. Well Location											
Location of Well											
TOWNSHIP (N/S)	RANGE (E/W)	SECTION	160 ACRE	40 ACRE	10 ACRE	BOOK	MAP	PARCEL			
3N	4E	32	SW	SE	SW	168	74	003G			

SECTION 2. Statement of Change of Well Ownership New Well Owner FULL NAME OF COMPANY, ORGANIZATION, OR INDIVIDUAL TEDESCO.DAVID MAILING ADDRESS 5037 E. SKY DESERT LANE CITY / STATE / ZIP PARADISE VALLEY, AZ 85253-CONTACT PERSON NAME AND TITLE TELEPHONE NUMBER (602) 791-5252 WELL ADDRESS 5037 E. Sky Desert Ln. WELL CITY Paradise Valley 85253 MAJOR CROSS ROADS ΕMΔII dtedesco@rnch.com

SECTION 3. Optional by Property Owner and Well Owner Only

By checking this box, I hereby provide ADWR permission to enter the property for the purpose of taking water level measurements at this well.

I HEREBY CERTIFY that the above statements are true to the best of my knowledge and belief. PREPARED BY SHARI CAMPOS DATE 6/15/2016

PAYMENT INFORMATION		
	Reference	DWR-5637
	Amount	\$30.00
	Date	6/15/2016

A Request to Change Well Information Form must be filed if there has been a change in the recorded information on a well already in existence. This may include more accurate information on the location of the well, more accurate information on the well construction details for the well, a change in the place of use or purpose of use of the water withdrawn from the well or a change in the county tax assessor's parcel identification number for the land where the well is located. It is the responsibility of the well owner to submit this information to ADWR. Forms may be obtained at the Arizona Department of Water Resources office or online at http://www.azwater.gov.

Arizona Department of Water Resources Water Management Division P.O. Box 36020, Phoenix, AZ 85067-6020 (602) 771-8627 • (602) 771-8690 fax • www.azwater.gov

Pump Installation Completion Report

Review instructions prior to completing form in black or blue ink.

The registered well owner should file this report with the Department within 30 days following installation of pump equipment.

OCT 3 0 2012

FILE NUMBER

WELL REGISTRATION NUMBER

55 -) 2 P (3 P)

** DI EACE DOINT OF EADI V **		· 0 0 2 (114	00 220900
** PLEASE PRINT CLEARLY **	N)	TOTAL CHARLESTAN	****	
SECTION 1. REGISTRY INFORMATIO	N	OCH CIAN DEIME	MENT _	
Well Owner		Location of Well	0.05 1150	
FULL NAME OF COMPANY, ORGANIZATION, OR INDIV		WELL LOCATION ADDRES	· ·	0 - 1
Scotta Paula Lyon		5037 É	MEZ SK.	Peret hu
503) E SKL Desent		TOWNSHIP (N/S) RANGE (EM	32	160 ACRE 40 ACRE 10 ACRE 3W 1/4 5E 1/4 5W 1/4
		COUNTY ASSESSOR'S PA	RCEL ID NUMB	BER (MOST RECENT)
Parilise Valley, A	285253	BOOK 168	MAP 74	PARCEL OO3 G
Mainty Piller TELEPHONE NUMBER FAX		COUNTY WHERE WELL IS	4	
602750 9131 azmy	SUHLORD	sestinet, co	n M	ani copu
SECTION 2. EQUIPMENT INSTALLED)		······································	
DATE PUMP INSTALLED		Pitless Adaptor		
7-10-12		CHECK ONE (SEE INSTR	UCTIONS FOR I	DEFINITION)
Pump Type		Was a pitless adapt		<u> </u>
CHECK ONE		Tras a piacos adapt	or motanoa	∑ No
		IF YES, DEPTH BELOW GI	ROUND LEVEL	THE DEVICE WAS INSTALLED
☐ Air Lift ☐ Rotary		,		Feet
Bucket St Submer	sible	Power Type		
Centrifugal Turbine		CHECK ONE		
	lease specify):	Diesel Engine		Natural Gas
Piston		Electric Motor		Windmill
		Gasoline Engine	.	Other (please specify):
		Hand	•	Care (piedeo speeliy).
RATED PUMP CAPACITY		HORSE POWER RATING (DE MOTOR	
TATED FOMIF GAPACITY	0 " 0 " "	HOROL FOWER TOTAL		
	Gallons Per Minute			· >
SECTION 3. PUMP TEST			***************************************	
Pump Test Data	Method of Dischar	rge Measurement	Method o	f Measuring Water Level
	CHECK ONE	go modouroment	CHECK ONE	<u> </u>
DATE WELL TESTED 7-19-12	☐ Bailer		🔲 Air Lin	ie
STATIC WATER LEVEL (A)	Bucket - Barrel	Stopwatch		c Measuring Line (Sounder)
「ファット Feet Below Land Surface	☐ Current		Steel	
PUMPING WATER LEVEL (B)	Estimated – Air	Lift	☐ Other	(please specify):
350 Feet Below Land Surface	☐ Gauge			
DRAWDOWN [(B) - (A)]	Meter Meter			
Feet Below Land Surface	Orifice			
TEST PUMPING RATE	☐ Volume			
/ Gallons Per Minute	Weir – Flume			
DURATION OF PUMP TEST (Minimum 4 Hours)	Other (please spe	ecify):		△> /> <i>A</i>
4 Hours				SYM
TOTAL PUMPING LIFT				•
660 Feet				
FOR FLOWING WELL,				
MEASURED SHUT IN HEAD				
I HEREBY CERTIFY that the above stateme	nte are true to the heet	of my knowledge and h	elief accordi	na to A.R.S. & 45-600(R)
SMNATURE OF WELLOWNER SQUEETE	וונט מוס נועס נט נווס טפטנ	or my knowledge and b		DATE ALL DATE
				10100117



Arizona Department of Water Resources

Water Management Division P.O. Box 36020 Phoenix, Arizona 85067-6020 AUG 17 2012 (602) 771-8627 • (602) 771-8690 fax

· www.azwater.gov ·

Well Driller Report and **Well Log**

THIS REPORT MUST BE FILED WITHIN 30 DAYS OF COMPLETING THE WELL.

PLEASE PRINT CLEARLY USING BLACK OR BLUE INK.

WELL REGISTRATION NUMBER 55-220900 PERMIT NUMBER (IF ISSUED)

FILE NUMBER

SECTIO	N 1. DRILLING AUTHORIZATI	ON										
Drilling	Firm											
::	Arizona Monios	e Had Inc	DWR LICENSE NUMBER 767									
Mail To:	ADDRESS 28150 N Almy S. CITY/STATE/ZIP	mod Prug 176	TELEPHONE NUMBER 480 471 2723									
	Sistinule A2 8	5762	azm	nsn	hiDo	Deise	ring	et, wa				
SECTIO	N 2. REGISTRY INFORMATIO	N			·····							
Well Ow			Location	of Well	0.45 4100							
	OF COMPANY, ORGANIZATION, OR INDIV	/IDUAL	WELL LOCA		`	<i>,</i> , ,						
MAILING AD	t+ Paula by on		TOWNSHIP	RANGE	SECTION	160 ACRE	40 ACRE	10 ACRE				
50	_	- hn	(N/S)	HEW)	37	5W1/4	4E 1/4	300 1/4				
PALA	FIRSKY De 12t E/ZIP CODE FRSON NAME AND TITLE	85253	Degrees	, Minutes	"N Seconds	Degrees	Minutes	"W Seconds				
1 -	PERSON NAME AND TITLE	l	LATITUDE/LC	NGITUDE (CH			Photo come (in a 21) ray con, rea abide Par-judición del Marche					
TELEPHON		LALAN W Open	LAND SURFACE ELEVATION AT WELL Feet Above Sea Level METHOD OF ELEVATION (CHECK ONE)									
WELL NAM	7 1313 A 2 M 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, etc.)	METHOD OF	ELEVATION (CHECK ONE)							
				TE DATUM (C	vey-Grade							
L			1									
			NAD-83 Other (please specify): COUNTY ASSESSOR'S PARCEL ID NUMBER									
			BOOK LAAD BARCEI									
			Mas	Zepu	168	> 7	4 1	2036				
SECTIO	N 3. WELL CONSTRUCTION I	DETAILS										
Drill Met		Method of Well Deve	elopment		Method	of Sealing	at Reduct	ion Points				
CHECK ALL	THAT APPLY	CHECK ALL THAT APPLY			CHECK O	NE						
Air R	otary	Airlift			Z No	ne						
☐ Bore	d or Augered	☐ Bail			,	cked						
Cabl	e Tool	Surge Block			\ <u>==</u>	edged						
☐ Dual	Rotary	Surge Pump			1 ==	lded						
	Rotary	Other (please s	pecify):		□ Oth	ier (please	specify):					
Reve	erse Circulation											
☐ Drive												
☐ Jette		Condition of Well				iction Date						
	ercussion / Odex Tubing	CHECK ONE			DATE WE	LL CONSTRUC		ED				
│	er (please specify):	☐ Capped			DATE VASE	- 10 - 1		IETED				
		Pump Installed)	-13-6		LETED				
I state the	t this notice is filed in compliance w	ith A.R.S. & 45-596 and	l is complet	e and corre	ct to the bes	t of mv knos	wledge and	belief.				
SIGNATURE	QF QUALIFYING PARTY		complet		DATE							
	mā) m	\sim			1 8	7-1	2					

well registration number 55 - 220 - 900

SECTION 4. WELL CONSTRUCTION DESIGN (AS BUILT) (attach additional page if needed)																						
Depth													4									
DEPTH OF E	oring 7	O	0					***************************************	Feet Below	Land	l Sur	face	DEPTH OF CO	2		D WE				Fee	Below	/ Land Surface
	evel Inform	nati	on																			
STATIC WATER LEVEL 70 Feet Below L					and Surface DATE MEASURED			TIP	WE N	EAS A	URED IF F		ving Ive			ieth thei		F FLC)W RE	GULATION		
					·																	
	Borehole	<u> </u>			<u> </u>			. 1		Г	MAT		nstalled Cas	ing	PE	RFO	RAT	ON T	TYPE	(T)	Т	
DEPTH SURF	FACE					EPTH SURF		A							<u> </u>							
FROM (feet)	TO (feet)	BOREHOLE DIAMETER (inches)			FROM TO (feet)		OUTER DIAMETER (inches)	STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	T	OTHE YPE, SCRIE	- 1	SLOT SIZE IF ANY (inches)		
D	20	1	2		7	1	λ.	0	8	x										•		
0	640	7	2	?		2	6		4.5		×			X								
640	660	7	2	'S		10		60	4,5		×							k				
660	680	7		B		60		ZV	4.5		X		***************************************	X								
680	700	7	2		60			טט	4.5	ļ	علا							علا				
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										·····	·					·	·	·				
DEDTE	FROM								stalled An										Γ	F	ILTER	PACK
	FACE			~	ш	BEI	NOT															
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OF CEMENT GROUT	CEMENT-BENTONITE GROUT	GROUT	CHIPS	PELLETS	(F	отн	IER 1		E OF ANNULAR M DESCRIBE	ATEI	RIAL	•			SAND	GRAVEL		SIZE
12	20		×							•												
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											2											
		-		1	 																	

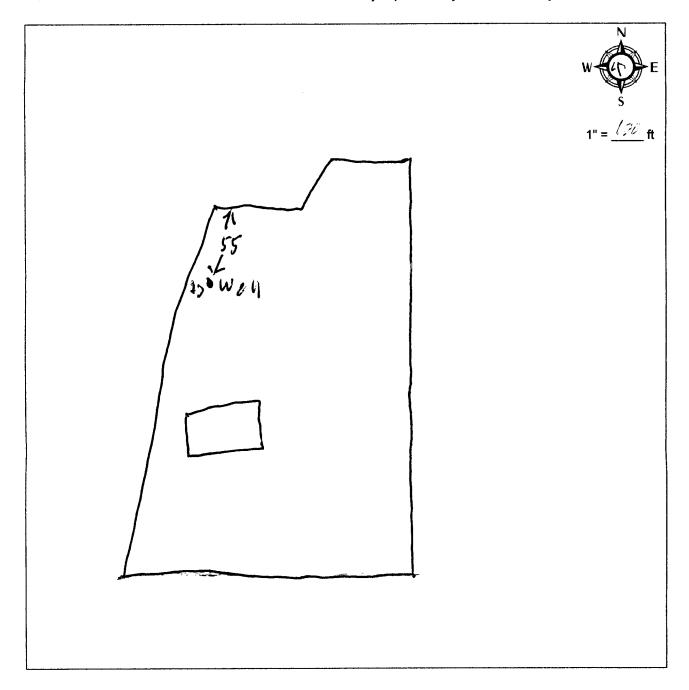
WELL REGISTRATION NUMBER

55 - 220 900

SECTIO	N 5. GEO	DLOGIC LOG OF WELL	
	FACE	Description	Check (T) every interval where
FROM (feet)	TO (feet)	Describe material, grain size, color, etc.	water was encountered (if known)
D	10	Soft TOA foil	
10	180	Clay Conglamorate W/ brown	
180	280	Hyrd branche Gray	1-26,A4
280	700	Clay Conglamorate W/ brown! Hand brown brug Hand Blue + Black Grants 660	1-26A4
			,

SECTION 6. WELL SITE PLAN						
NAME OF WELL OWNER	COUNTY ASSESSOR'S PARCEL ID NUMBER					
	BOOK/BS	MAP 4	PARCEL 003 C			

- Please draw the following: (1) the boundaries of property on which the well was located; (2) the well location; (3) the locations of all septic tank systems and sewer systems on the property or within 100 feet of the well location, even if on neighboring properties; and (4) any permanent structures on the property that may aid in locating the well.
- Please indicate the distance between the well location and any septic tank system or sewer system.



Run Date: 06/21/2012

AZ DEPARTMENT OF WATER RESOURCES **WELL REGISTRY REPORT - WELLS55**

Well Reg.No

Location A 3.0 4.0 32 C D C **55** - 220900

AMA PHOENIX AMA

Registered

SCOTT & PAULA LYON

Name

5037 E SKY DESERT LANE

File Type NEW WELLS (INTENTS OR APPLICATIONS)

Application/Issue Date 06/21/2012

PARADISE VALLEY

AZ 85253

Owner OWNER

Driller No. 767

Driller Name ARIZONA MONSOON H2O, INC.

Driller Phone 480-471-2323

County MARICOPA

Parcel No. 168-74-003G

Intended Capacity GPM

Well Type NON-EXEMPT

SubBasin EAST SALT RIVER VALLEY

Watershed SALT RIVER

Registered Water Uses DOMESTIC

Registered Well Uses WATER PRODUCTION

Discharge Method NO DISCHARGE METHOD LISTED

Power NO POWER CODE LISTED

Well Depth

0.00

Case Diam

0.00 0.00 **Tested Cap**

0.00

Pump Cap. Draw Down 0.00 0.00

Case Depth Water Level Acres Irrig

0.00 0.00 **CRT** Log

Finish NO CASING CODE LISTED

Contamination Site:

Tribe: Not in a tribal zone

Comments 5037 E. Sky Desert Ln., Paradise Valley, AZ 85253

Places Of Use

Α 3 0 **4** 0 32 C D C

Current Action

6/21/2012

555

DRILLER & OWNER PACKETS MAILED

Action Comment: bew

Action History

6/21/2012

550

DRILLING AUTHORITY ISSUED

NO - NOT IN ANY WQARF SITE

Action Comment:

bew

6/19/2012

907

45-454(C) LAND NOT WITHIN 100 FT. OF DESIGNATED PROVIDER

Action Comment: bew

6/19/2012

150

NOI RECEIVED FOR A NEW PRODUCTION WELL

Action Comment: bew

6/19/2012

210

COUNTY HEALTH AUTHORITY ENDORSED

Action Comment: bew

ARIZONA DEPARTMENT OF WATER RESOURCES WATER MANAGEMENT SUPPORT SECTION

3550 N. Central Avenue Phoenix, Arizona 85012

THIS AUTHORIZATION SHALL BE IN POSSESSION OF THE DRILLER DURING ALL DRILL OPERATIONS

WELL REGISTRATION NO: 55-220900

ARIZONA MONSOON H2O, INC. **AUTHORIZED DRILLER:**

NOTICE OF INTENTION TO DRILL A NON-EXEMPT WELL(S) HAS BEEN FILED WITH THE DEPARTMENT BY:

LICENSE NO: 767

WELL OWNER: SCOTT & PAULA LYON 5037 E SKY DESERT LANE PARADISE VALLEY, AZ 85253

THE WELL(S) IS/ARE TO BE LOCATED IN THE:

SW % OF THE SE % OF THE SW % SECTION 32 TOWNSHIP 3 NORTH RANGE 4 EAST

NO. OF WELLS IN THIS PROJECT: 1

ASSESSOR PARCEL NO: 168-74-003G

THIS AUTHORIZATION EXPIRES AT MIDNIGHT ON THE 20TH DAY OF JUNE, 2013

the mudi

WATER MANAGEMENT SUPPORT

WITHIN 30 DAYS OF COMPLETION OF DRILLING THE DRILLER MUST FILE A LOG OF THE WELL



ARIZONA DEPARTMENT OF WATER RESOURCES

3550 N. Central Avenue, Phoenix, Arizona 85012 Telephone (602) 771-8500 Fax (602) 771-8691

June 21, 2012



JANICE K. BREWER Governor

SANDRA A. FABRITZ-WHITNEY
Director

SCOTT & PAULA LYON 5037 E SKY DESERT LANE PARADISE VALLEY, AZ 85253

Registration No. 55-220900 File No. A(3-4) 32 CDC

Dear Well Owner:

Enclosed is a copy of the Notice of Intention (NOI) to Drill a well that you recently filed with this Department pursuant to A.R.S. § 45-596. This is to inform you that the Department has approved the NOI and has mailed or otherwise provided a drilling card authorizing the drilling of the well to the well driller identified in the NOI. The driller may not begin drilling until he has received the drilling card, which must be displayed on the drill rig during drilling.

Well drilling activities must be completed within one year after the date the NOI was filed with the Department. If drilling is not completed within one year, you must file a new NOI before proceeding with further drilling. If in the course of drilling the well, it is determined that the well cannot be successfully completed as initially intended (dry hole, cave in, lost tools, etc.), the well must be properly abandoned and a Well Abandonment Completion Report must be filed as required by A.A.C. R12-15-816(F).

If you change drillers, you must notify the Department of the new driller's identity. Please ensure that the new driller is licensed by the Department to drill the type of well you require. A new driller may not begin drilling until he receives a new drilling card from the Department. If you are drilling a new or replacement well and it is necessary to change the location of the proposed well, you may not proceed with drilling until you file an amended NOI with the Department and the Department issues an amended drilling card to the driller. If county approval was required for the original well site plan (this applies to domestic wells on parcels that are five acres or less), you must submit a new well site plan with the new well location to your local county health authority for approval prior to filing the amended NOI with the Department.

A.R.S. § 45-600 requires the registered well owner to complete and file a Pump Installation Completion Report form (DWR form 55-56) within 30 days after the installation of pumping equipment. A form is enclosed for your use. Also enclosed is a well owner's guide that provides useful information and advice concerning your upcoming well construction project. A.R.S.§ 45-600 also requires the driller to file a complete and accurate Well Drillers Report and Well Log (DWR form 55-55) within 30 days after completion of drilling. That form was mailed to your driller with the drilling card. You should insist and ensure that all of the required forms are accurately completed and timely filed with the Department.

Please be advised that A.R.S. § 45-593(C) requires the person to whom a well is registered to notify the Department of a change in ownership of the well and/or information pertaining to the physical characteristics of the well in order to keep this well registration file current and accurate. Any change in well information or a request to change well driller must be filed on a Request to Change Well Information form (DWR form 55-71A) that may be downloaded from the ADWR Internet website at http://www.water.az.gov/adwr/content/forms/default.htm#NOI.

Sincerely, Brue F. Wesley

Bruce Wildey NOI Unit

Water Management Support Section

Enclosures

Printed on recycled paper. Each ton of recycled paper saves 7,000 gallons of water.



Arizona Department of Water Resources

Water Management Support Section P.O. Box 33589 Phoenix, Arizona 85067-3589 (602) 771-8500 • (800) 352-8488

(602) 771-8691 fax • www.azwater.gov

Notice of Intent to Drill/Deepen, Replace or Modify a Well (except a Nex-Exempt Well in an Active Management Area)

If the proposed well is in an Active Management Artia, you must also file a supplemental form FF 400

also file a supplemental form 55-40A.

\$150 or \$100 FEE

				
Review instructions	prior to co	mpleting for	rm in black	or blue ink.

- You must include with your Notice:
- Check or money order in the amount of the appropriate filing fee. For a well located within an AMA or INA, the fee is \$150.00.
- For a well not located within an AMA or INA, the fee is \$100.00 if the well will be used solely for domestic purposes (see page 2 and

instructions) and will have a pump with a maximum capacity of not more than 35 gallons per minute. Otherwise, the fee is \$150.00.

WOARF CERCLA 00

FILE NUMBER 32CDC WELL REGISTRATION NUMBER

Authority for fee: A.R.S. § 4	5-596. ** PLEASE		IT CLE	ARI V **						
SECTION 1. COUNTY OF	LOCAL HEALTH AUTHO									
If water from the proposed well wi	ll be used for domestic purposes or	n a parc	el of land	d of 5 or fewer acres, the applicable county or local health authority						
must endorse all items in Section	1 within one year before submission	n to the	Departm	ment of Water Respectes: Plau tilest also attach a site plan (pg. 3)						
CHECK ONE				Official Coplete of Cop Seaf or Stamp						
(pursuant to A.R.S. § 45-5	thority Recommends Approval	-		STOPA COLO						
Field Inspection				JUN 192012						
Site Plan Review	Only									
☐ Insufficient Information to	Make a Determination									
COUNTY OR LOCAL AUTHO	RITY NAME AND TITLE SPE	~		The state of the s						
TELEPHONE NUMBER	DATE 6/19/201		CON	NTY OR LOCAL CHAPTER SIENATURE						
SECTION 2. REGISTRY	NFORMATION		<u> </u>							
Well Type	Proposed Action			tion of Well						
CHECKONE	CHECK ONE			OCATION ADDRESS (IF ANY) COUNTY WHERE WELL IS LOCATED:						
Exempt	☐ Drill New ₩ell		50)	P(NS) RANGE (EM) SECTION 180 ACRE 40 ACRE 10 ACRE						
(Pump has a maximum capacity	☐ Deepen		TOWNSHIP							
of not more than 35 gpm <u>and</u> water is not used for irrigation	☐ Replace		30	1 4E 32 SWX SEX SWX						
purposes inside an AMA.)	☐ Modify		COUNT	Y ASSESSOR'S PARCELID NUMBER # OF ACRES						
(See instructions.)	If Deepening, Replacing or Modi	ifying:	воок	MAP PARCEL						
☐ Non-Exempt	ORIGINAL WELL REGISTRATION NUM	MBER		168 DOJG 2.8						
(Pump has a maximum capacity	55 -		Place	of Water Use (Mandatory information, see instructions.)						
of more than 35 gpm <u>and</u> the well is located outside an AMA.)	MAXIMUM CAPACITY OF ORIGINAL	. WELL	Is the groundwater basin where the well will be drilled the							
(See instructions.)	Gallons Per	Minute	الحالية بالمناب المناب المناب المناب							
DESIGN PUMP CAPACITY	DISTANCE & DIRECTION FROM ORIGINAL	WELL	TOWNSHIE	P (NS) RANGE (EAV) SECTION 160 ACRE 40 ACRE 10 ACRE						
La Ka Galland Por Minute		Feet	3	N 4E 32 SW SE SW						
SECTION 3. OWNER INF	OPMATION	1 66(<u> </u>	W						
	URMATION		Lond	Company (if different from 181-11 Compan)						
Well Owner	7471011 00 10011111111111111111111111111			lowner (if different from Well Owner) IAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL						
FULL NAME OF COMPANY, ORGAN	ZATION, OR INDIVIDUAL		FULLIN	AME OF COMPANT, GOVERNMENT AGENCT, OR INDIVIDUAL						
Scott 4 Paula	Lyon	-	MAII IN	G ADDRESS ,						
	Delate									
503) ESKy CITY/STATE/ZIP CODE	Desert hn.	***	CITY/STATE/ZIP CODE CODE							
Parilice Valley	AZ 85253		, ,							
CONTACT PERSON NAME AND TITI	//2 0 0 0 0 J		CONTA	ACT PERSON NAME AND TITLE						
In arty Dr.1			1							
TELEPHONE NUMBER			TELEPI	HONE NUMBER FAX						
6027509131	92/9150h1201	Pesent	1001	r. Ubin						
SECTION 4.										
Questions		Yes	No	If Yes:						
1. Is the proposed well site within	n 100 feet of a septic tank		7	You must also request a variance (A.A.C. R12-15-418).						
system, sewer disposal area, petroleum storage area or tar				1 YOU MUST Also request a Variance (A.A.U. R1Z-10-000).						
i – perpeum storage area of tat]]							
	k?		1	PLEASE STATE OUR OF						
2. Is there another well name or	k?		<i>y</i>	PLEASE STATE SOLEM.						
2. Is there another well name or	k? identification number Lot 35 Well, Smith Well, etc.)? vell to be located within an		<i>y</i>							

the same use?

is the proposed well the second exempt well on this parcel for

WELL	REGISTRATION NUMBER	
55 -	220900	

		33-00000
SECTION 5. DRILLING AUTHORIZATION	SECTION 6. WATER / SITE	INFORMATION
Drilling Firm	Principal Use of Water	Other Uses of Water
NAME Av. 7 2.1 a Monson H2 O Fre DWR LICENSE NUMBER 7 67 TELEPHONE NUMBER 4804712323 MAILING ADDRESS CITY/STATE/ZIP CODE S Cotts 9, 1-4 42 8 (162)	CHECK ONE Irrigation Utility Commercial Y Domestic Municipal	CHECK ALL THAT APPLY Irrigation Utility Commercial Domestic Municipal Industrial Mining Stock Recharge
When Permits are approved	Dewatering Other* (please specify):	Dewatering Other* (please specify):
SIATE TO STATE OF STA		

NOTE: If this is a Notice of Intent to construct a new well that will be used for the purpose of withdrawing groundwater for transportation to an Active Management Area (AMA) pursuant to A.R.S. § 45-552, 45-553, 45-554 or 45-555(A), the authorization to drill the well issued in association with this Notice shall not be considered the approval to transport groundwater to an AMA. (see instructions.)

SECTION 7. PROPOSED WELL CONSTRUCTION Borehole					Casing											
DEPTH FROM SURFACE			DEPTH FROM SURFACE		MATERIAL TYPE (T)			PERFORATION TYPE (T)								
	BOREHOLE DIAMETER (inches)	FROM (feet)	TO (feet)	OUTER DIAMETER (inches)	STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	GROUTING MATERIAL	
U	19	13	-1	19	8	X*										Cement
U	700) 28	D	700	5		عر			-				X		
						-				+	-	-	_			
					-				naturnija unit jaroja praja prijas ing anacasa ancesa. Sa		_				nderform many business of many supplications and the participation of the supplication	Maria di Salamania

^{*} ADWR well construction standards require a surface seal consisting of a minimum of 20 feet of steel casing. Cement grout must be used to fill the annular space between the surface casing and the borehole. (A.A.C. R12-15-811(B))

The Department's issuance of an authorization to drill a well is not a determination of whether water withdrawn from the well is legally surface water or groundwater. The legal nature of the water withdrawn from the well may be the subject of court action in the future as part of a determination of surface water rights in your area. If there are court proceedings that could affect your well, you will be notified and be given the opportunity to participate. If you have questions regarding the legal nature of the water to be withdrawn from your proposed well, please consult with an experienced civil engineer, hydrologist or water rights attorney.

For the purposes of determining appropriate fees outside AMAs or INAs, "domestic purposes" is defined as "uses related to the supply, service and activities of households and private residences and includes the application of water to less than 2 acres of land to produce plants or parts of plants for sale or human consumption, or for use as feed for livestock, range livestock or poultry, as such terms are defined in A.R.S. § 3-1201."

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the	ne best of my knowledge and belief.
TYPE OR PRINT NAME AND TITLE	
Paul Lyon Uwner	
SIGNATURE OF WELL OWNER	DATE
Lexter -	0.5.12
SIGNATURE OF JANDOWNER, IF APPLICABLE (SEE INSTRUCTIONS)	DATE

Notice of Intent to Drill, Deepen, Replace or Modify a Well

WELL REGISTRATION NUMBER 55- 22090Cs

CHECK ONE: X FILING MANUALLY

FILING ELECTRONICALLY* *DRILLER'S E-MAIL ADDRESS

COUNTY C	OR LOCAL	HEALTH AUTHORIT	Y APPROVAL CODE

COUNTY APPROVAL CODE

If applicant is filing this NOI electronically via the ADWR website and County approval is required, please indicate approval by providing a County Approval Code.

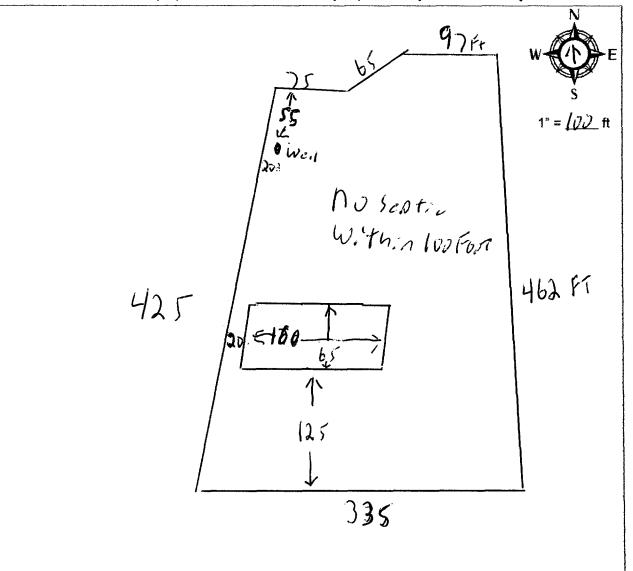
WELL SITE PLAN NAME OF WELL OWNER Paula

COUNTY ASSESSOR'S PARCEL ID NUMBER BOOK

PARCEL 0036

If this well will be a domestic well on 5 acres or less, please draw the following: (1) the boundaries of your property; (2) the proposed well location; (3) the locations of all septic tank systems and sewer systems on the property or within 100 feet of the well location, even if on neighboring properties; and (4) any permanent structures on the property that may aid in locating the well. If the parcel is vacant land or lacks a septic tank or sewer system, please indicate this,

Indicate the distance between the proposed well location and any septic tank system or sewer system.



YOR LOCAL AUTHORITY NAME AND TITLE esley Rw NHh Size OR LOCAL AUTHORITY SIGNATURE DATE

bçal Seal or Stamp



Arizona Department of Water ResourcesWater Management Support Section 3550 N. Central Ave. Suite 200, Phoenix, Az 85012

(602) 771 8500 --- (800) 352-8488 www.water.az.gov

Certification to the Notice of Intention to Drill a Remediation Well within an Active Management Area Pursuant to A.R.S. § 45-454(C) & (F)

Remediation Well Certification of Compliance with A.R.S. § 45-454(C) or Request for Exemption Pursuant to A.R.S. § 45-454(F)

FILE NUMBER

A (3-4)32 CDC

WELL REGISTRATION NUMBER

55 - 220900

Effective January 1, 2006, Arizona Revised Statute (A.R.S.) § 45-454(C) prohibits the drilling of an exempt well (a well that has a maximum pump capacity of not more than thirty-five gallons per minute and that is used only for non-irrigation purposes) on land if any part of the land is within 100 feet of the operating water distribution system of a municipal water provider that has an assured water supply designation (designated water provider) within the boundaries of an Active Management Area (AMA) as shown on a digitized service area map provided to the Director by the municipal provider and updated by the municipal provider as specified by the Director.

A remediation well drilled for the purpose of remediating groundwater (a monitor or environmental well with an anticipated level of production high enough to require establishing an end use, for example a pump and treat or plume control operation) is exempt from A.R.S. § 45-454(C) if it meets one of the following exemptions under A.R.S. § 45-454(F):

- 1. The remediation well is for an approved Department of Environmental Quality or United States Environmental Protection Agency remediation program.
- A registered geologist certifies that the remediation well is for the purpose of remediation.

In order to obtain authority to drill an exempt for the purpose of remediating groundwater within an AMA, you must fill out the appropriate box below certifying compliance with A.R.S. § 45-454(C) or requesting an exemption pursuant to A.R.S. § 45-454(F).

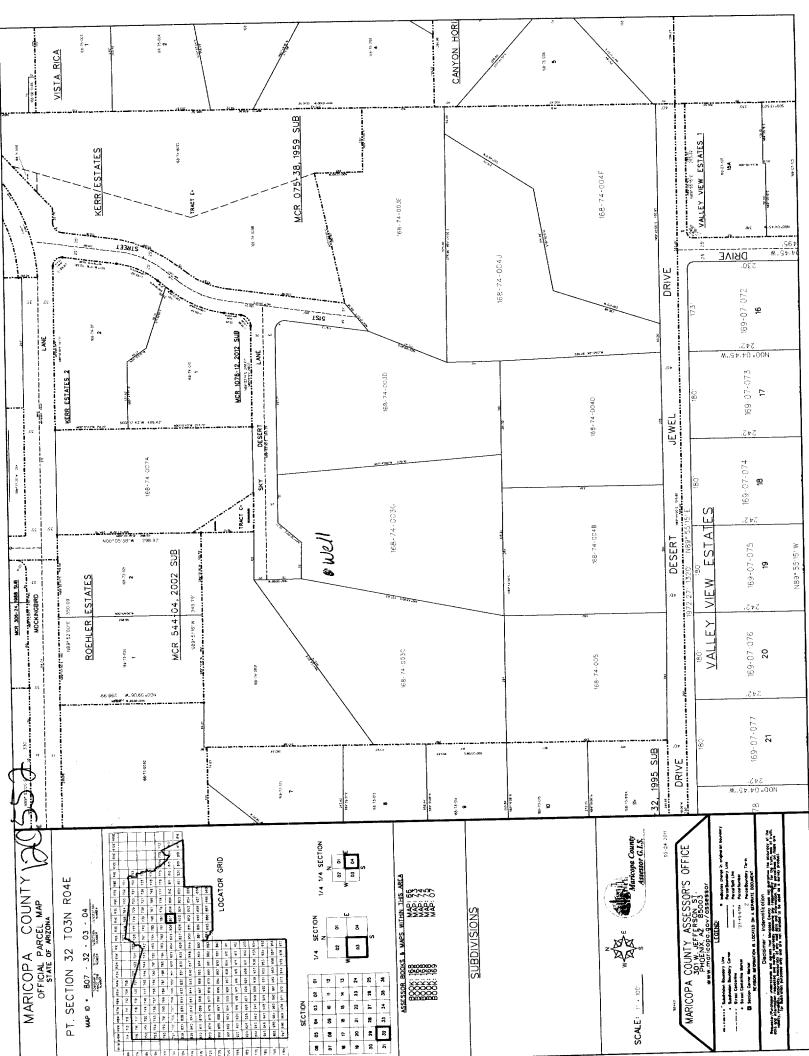
CERTIFICATION OF COMPLIANCE WITH A.R.S. § 45-454(C)

I certify that no portion of the land on which the proposed exempt well is to be drilled is within one hundred feet of the operating water distribution system of a municipal water provider with an assured water supply designation as shown on the provider's most recent digitized service area map on file with the Arizona Department of Water Resources. I understand that this condition may change prior to the commencement of well drilling and that if, at the time drilling is to commence, the land is within one hundred feet of the operating water distribution system of a municipal water provider with an assured water supply designation as shown on the provider's most recent digitized service area map on file with the Department, the well may not be drilled unless I apply for and am granted an exemption pursuant to A.R.S. § 45-454(F). (If your exempt well falls into this category, complete "Signature" and submit the form)

Continued on Reverse

REQUEST FOR EXEMPTION PURSUANT TO A.R.S. § 45-454(F)
The land on which the proposed exempt well is to be drilled is within one hundred feet of the operating water distribution system of a municipal water provider with an assured water supply designation as shown on the most recent service area map provided by the municipal provider to the Director of the Arizona Department of Water Resources. Name of municipal provider:
In accordance with A.R.S. § 45-454(F), I am requesting exemption # 1 2 pursuant to A.R.S. § 45-454(F)(1) (Check One)
or (2) as applicable. I certify that I meet the requirements for the exemption.
NOTE: You must attach to this form evidence of the applicability of the exemption as follows:
Exemption #1: Documentation demonstrating that the well is for an approved Department of Environmental Quality or United States Environmental Protection Agency remediation program.
Exemption #2: A copy of a registered geologist's certification that the well is for the purpose of remediation.
SIGNATURE
TYPE OR PRINT NAME OF LANDOWNER
SIGNATURE OF LANDOWNER DATE SIGNED (67)2

NOTE: A current listing of designated water providers may be found at: http://www.azwater.gov/dwr/Content/Find_by_Category/Permits_Forms_Applications/Files/AssuredWaterSupply/List_of_Designated_Providers_2005.pdf.



SRSI		Mochingbook Sistel Sost ESKy Dosen	w hr	N← S	E
	Lincoln				

SR 51 North to Lincoln East to

Tatum Blud North To Macking bird Lin East
to 51st Pl South to 5ky Pasex Lin West to
5037 E 3ky Pesex Lin Un South 5:32 OR

Street

Printed: 6/19/2012 1:51:52 PM

Arizona Department of Water Resources

3550 N Central Ave.

Phoenix AZ 85012

Customer:

ARIZONA MONSOON H20, INC. 28150 N ALMA SCHOOL PKWY

SCOTTSDALE, AZ 85262

#103/176

MAIN OFFICE Office:

12-23268

Receipt #:

06/19/2012

Receipt Date:

IN_PERSON Sale Type:

Cashier:

WRSYM

150.00

150.00

150.00

RECEIPT TOTAL:

Ext Price

Unit Price

Q

Ref ID

220900

well described in subsection (A)(1)(h) of this Notice of intention to drill a well other than a

Description

Section

4439-TT AOBJ

15245 Index

67488

Item No.

CHECK Amount Paid: \$150.00 Payment type:

Payment Received Date: 06/19/2012 FROM TTA. Notes:

006235 Check#

Page 1 of 1